



State of Tennessee

Health Services and Development Agency

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AGENDA

Legislative Plaza
Room 12
Sixth Avenue North & Union Street
Nashville, TN

Wednesday, May 28, 2014
8:30 a.m. CDT

- I. CALL TO ORDER
- II. ROLL CALL – **10 members present: Jordan, Mills, Flora, Gaither, Doolittle, Wright, Burns, Hodge, Byrd, Johnson**
- III. DIRECTOR'S ANNOUNCEMENTS
- IV. APPROVAL OF MINUTES -- **Motion to Accept: Mr. Wright; 2nd: Ms. Byrd**
[10-0-0 by Unanimous voice vote]

V. STATE HEALTH PLAN UPDATE

- A. Update: Jeff Ockerman, Director of Health Planning, Department of Health

VI. CERTIFICATE OF NEED APPLICATIONS

Ms. Burns & Dr. Flora recused.

APPROVED

Motion: Ms. Jordan
2nd: Ms. Byrd
8-0-0

- A. Summit Medical Center, Hermitage (Davidson County), TN – CN1402-004
The addition of 8 medical surgical beds which will increase the hospital's licensed bed complement from 188 to 196. The new beds will be located in renovated space on the 7th floor which currently houses the Sleep Lab. The estimated project cost is \$1,812,402.00.

Ms. Burns recused.

APPROVED

Motion: Mr. Wright
2nd: Mr. Doolittle
9-0-0

- B. Southern Tennessee Regional Health System – Winchester (f.k.a. Southern Tennessee Medical Center), Winchester (Franklin County), TN – CN1402-005
The initiation of mobile Positron Emission Tomography (PET) services one half-day per week at the main hospital campus. The estimated project cost is \$834,135.00.

VII. GENERAL COUNSEL'S REPORT

APPROVED

Motion: Mr. Doolittle
2nd: Ms. Burns
10-0-0

- A. Morristown-Hamblen Hospital, Morristown (Hamblen County), TN – CN1009-040A
Request for a six (6) month extension of the expiration date from August 1, 2014 to February 1, 2015. The project was unanimously approved on December 15, 2010 for the acquisition of a stationary (fixed) positron emission tomography/computerized tomography (PET/CT) unit to replace and upgrade the existing mobile PET/CT equipment with an expiration date of February 1, 2014. A six month extension was approved on December 18, 2013 which extended the expiration date to August 1, 2014. The estimated project cost is \$4,695,707.00.

APPROVED

Motion: Ms. Burns
2nd: Mr. Wright & Mr.
Doolittle
10-0-0

- B. Memphis Gastroenterology Endoscopy Center East, Germantown (Shelby County), TN — CN0406-059A
Request for modification of a condition due to a merger of one of the physician groups authorized to use the facility. The condition currently limits the ambulatory surgical treatment center to the patients of Memphis Gastroenterology Group, P.C. (MGG) and UT Medical Group. The modification is requested due to the merger of MGG and Gastroenterology Center of the Mid-South, P.C., d/b/a Gastro One (GO) which will be effective July 1, 2014. Under the terms of the merger the assets and liabilities of MGG related to the facility will be transferred to a wholly-owned subsidiary of GO. The modified condition would read “Limited to the endoscopy outpatients of Gastroenterology Center of the Mid-South, P.C., d/b/a Gastro One and UT Medical Group.” The original project was approved by unanimous vote on August 25, 2004 with a project cost of \$4,794,559.00.

C. Contested Case Update

VIII. TENNESSEE HEALTH CARE INNOVATION INITIATIVE

- A. Brooks Daverman, Strategic Planning and Innovation Group, Tennessee Department of Finance and Administration, Division of Health Care Finance and Administration – [Keith Gaither gave the presentation in Mr. Daverman’s absence.](#)

IX. OTHER BUSINESS -- Emergency Certificate of Need Request

APPROVED

Motion: Mr. Wright
2nd: Ms. Hill
3-0-0

[Rule 0720-10-.04(2)—
3 voting members of an
emergency CON -- the
Chair, Vice-Chair and
Executive Director]

- A. Life House Hospice, Inc. Cookeville (Putnam County), TN — CN1405-016
Emergency certificate of need request for the establishment of a home care organization to provide hospice services in Putnam County, Tennessee in conjunction with the existing Life House Residential Hospice located at 570 State Street, Cookeville, Tennessee. The emergency certificate of need is requested because Life House, a licensed residential hospice, had to cease all residential/inpatient operations due to its inability to become Medicare-certified because CMS will not certify a stand-alone residential hospice.

X. ADJOURNMENT